

DMV Lane Technician Observation Report

DMV Technician: <u>DAVE TAMBEE</u>		Position: <u>1</u> or 2	
Station: <u>CAROLAN</u>	Date: <u>12-3-14</u>	Time: <u>2:00</u>	
Vehicle Make: <u>Ford</u>	Model: <u>Ranger</u>	Year: <u>2010</u>	
GVWR:	Fuel Type: <u>G</u>	Registration Number: <u>CL16406</u>	
Auditor: <u>Dossett</u>		Covert/ <u>Overt</u> (Circle One)	
		YES	NO
1. Did technician check vehicle paper work and verify VIN number?		<u>✓</u>	
2. Was Emissions testing required?		<u>✓</u>	
a) Was Emissions testing performed using OBD?			<u>✓</u>
b) Was Emissions testing performed using Analyzer Probe?		<u>✓</u>	
c) Was Emissions testing performed using Paddle(s)?			<u>✓</u>
d) Was Emissions testing performed using Clip?			<u>✓</u>
3. Was Catalytic Converter inspection required?			<u>✓</u>
a) Was Catalytic Converter inspection performed?			<u>✓</u>
4. Was Fuel Tank pressure testing required?			<u>✓</u>
a) Was Fuel Tank pressure testing performed?			<u>✓</u>
5. Was Fuel Cap pressure testing required?			<u>✓</u>
a) Was Fuel Cap pressure testing performed?			<u>✓</u>
6. Is this test a Re-check from a prior failure?			<u>✓</u>
a) Which re-check test is being performed? 1 2 3 (circle one)			<u>✓</u>
b) If this is re-check #3, was repair paperwork verified for waiver?			<u>✓</u>
Sussex County Only			
7. Was Curb Idle testing required?		<u>✓</u>	
a) Was Curb Idle testing performed?		<u>✓</u>	
Comment:			

Original 08/06/2009/TMP

DMV Lane Technician Observation Report

DMV Technician: <u>Ron Griffith</u>		Position: <u>1 or 2</u>	
Station: <u>Georgetown</u>		Date: <u>12-3-14</u>	Time: <u>1:45</u>
Vehicle Make: <u>Genly GMC</u>		Model: <u>Sierra</u>	Year: <u>2008</u>
GVWR: <u>6500</u>	Fuel Type: <u>G</u>	Registration Number: <u>C36118</u>	
Auditor: <u>Dossert</u>		Covert/ <u>Overt</u> (Circle One)	
		YES	NO
1. Did technician check vehicle paper work and verify VIN number?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Was Emissions testing required?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
a) Was Emissions testing performed using OBD?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Was Emissions testing performed using Analyzer Probe?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
c) Was Emissions testing performed using Paddle(s)?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Was Emissions testing performed using Clip?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Was Catalytic Converter inspection required?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Was Catalytic Converter inspection performed?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Was Fuel Tank pressure testing required?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Was Fuel Tank pressure testing performed?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Was Fuel Cap pressure testing required?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Was Fuel Cap pressure testing performed?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Is this test a Re-check from a prior failure?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Which re-check test is being performed? 1 2 3 (circle one)		<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) If this is re-check #3, was repair paperwork verified for waiver?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Sussex County Only			
7. Was Curb Idle testing required?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
a) Was Curb Idle testing performed?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comment:			

Original 08/06/2009/TMP

DMV Lane Technician Observation Report

DMV Technician: <u>Tom Tedlow</u>		Position: <u>1</u> or 2	
Station: <u>Georgetown</u>		Date: <u>12-3-14</u>	Time: <u>1:30</u>
Vehicle Make: <u>VW</u>		Model: <u>Passat</u>	Year: <u>2005 2004</u>
GVWR:	Fuel Type: <u>G</u>	Registration Number: <u>425701 VN41709</u>	
Auditor: <u>Dosserr</u>		Covert/ <u>Overt</u> (Circle One)	
		YES	NO
1. Did technician check vehicle paper work and verify VIN number?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Was Emissions testing required?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
a) Was Emissions testing performed using OBD?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Was Emissions testing performed using Analyzer Probe?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
c) Was Emissions testing performed using Paddle(s)?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Was Emissions testing performed using Clip?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Was Catalytic Converter inspection required?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Was Catalytic Converter inspection performed?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Was Fuel Tank pressure testing required?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Was Fuel Tank pressure testing performed?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Was Fuel Cap pressure testing required?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Was Fuel Cap pressure testing performed?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Is this test a Re-check from a prior failure?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Which re-check test is being performed? 1 2 3 (circle one)		<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) If this is re-check #3, was repair paperwork verified for waiver?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Sussex County Only			
7. Was Curb Idle testing required?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
a) Was Curb Idle testing performed?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comment:			

Original 08/06/2009/TMP

DMV Lane Technician Observation Report

DMV Technician: <u>CARLO RODRIGUEZ</u>		Position: <u>1</u> or 2	
Station: <u>Geo</u>		Date: <u>12-3-14</u>	Time: <u>1:20</u>
Vehicle Make: <u>LINCOLN</u>		Model: <u>MK2</u>	Year: <u>2009</u>
GVWR:	Fuel Type: <u>G</u>	Registration Number: <u>HP16086</u>	
Auditor: <u>DOSSERT</u>		<u>Covert</u> /Overt (Circle One)	
		YES	NO
1. Did technician check vehicle paper work and verify VIN number?		<input checked="" type="checkbox"/>	
2. Was Emissions testing required?		<input checked="" type="checkbox"/>	
a) Was Emissions testing performed using OBD?			<input checked="" type="checkbox"/>
b) Was Emissions testing performed using Analyzer Probe?		<input checked="" type="checkbox"/>	
c) Was Emissions testing performed using Paddle(s)?			<input checked="" type="checkbox"/>
d) Was Emissions testing performed using Clip?			<input checked="" type="checkbox"/>
3. Was Catalytic Converter inspection required?			<input checked="" type="checkbox"/>
a) Was Catalytic Converter inspection performed?			<input checked="" type="checkbox"/>
4. Was Fuel Tank pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Tank pressure testing performed?			<input checked="" type="checkbox"/>
5. Was Fuel Cap pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Cap pressure testing performed?			<input checked="" type="checkbox"/>
6. Is this test a Re-check from a prior failure?			<input checked="" type="checkbox"/>
a) Which re-check test is being performed? 1 2 3 (circle one)			<input checked="" type="checkbox"/>
b) If this is re-check #3, was repair paperwork verified for waiver?			<input checked="" type="checkbox"/>
Sussex County Only			
7. Was Curb Idle testing required?		<input checked="" type="checkbox"/>	
a) Was Curb Idle testing performed?		<input checked="" type="checkbox"/>	
Comment:			

Original 08/06/2009/TMP

DMV Lane Technician Observation Report

DMV Technician: <u>Steve Aron</u>		Position: <u>1 or 2</u>	
Station: <u>Georgetown</u>		Date: <u>12-3-14</u>	Time: <u>1:25</u>
Vehicle Make: <u>GMC</u>		Model: <u>Yukon</u>	Year: <u>2002</u>
GVWR: <u>7200</u>	Fuel Type: <u>G</u>	Registration Number: <u>VN43735</u>	
Auditor: <u>Dosser</u>		Covert/ <u>Overt</u> (Circle One)	
		YES	NO
1. Did technician check vehicle paper work and verify VIN number?		<input checked="" type="checkbox"/>	
2. Was Emissions testing required?		<input checked="" type="checkbox"/>	
a) Was Emissions testing performed using OBD?			<input checked="" type="checkbox"/>
b) Was Emissions testing performed using Analyzer Probe?		<input checked="" type="checkbox"/>	
c) Was Emissions testing performed using Paddle(s)?			<input checked="" type="checkbox"/>
d) Was Emissions testing performed using Clip?			<input checked="" type="checkbox"/>
3. Was Catalytic Converter inspection required?			<input checked="" type="checkbox"/>
a) Was Catalytic Converter inspection performed?			<input checked="" type="checkbox"/>
4. Was Fuel Tank pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Tank pressure testing performed?			<input checked="" type="checkbox"/>
5. Was Fuel Cap pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Cap pressure testing performed?			<input checked="" type="checkbox"/>
6. Is this test a Re-check from a prior failure?			<input checked="" type="checkbox"/>
a) Which re-check test is being performed? 1 2 3 (circle one)			<input checked="" type="checkbox"/>
b) If this is re-check #3, was repair paperwork verified for waiver?			<input checked="" type="checkbox"/>
Sussex County Only			
7. Was Curb Idle testing required?		<input checked="" type="checkbox"/>	
a) Was Curb Idle testing performed?		<input checked="" type="checkbox"/>	
Comment:			

Original 08/06/2009/TMP

DMV Lane Technician Observation Report

DMV Technician: <u>Jordan Champlin</u>		Position: <u>Dor 2</u>	
Station: <u>WOLFELOW</u>		Date: <u>12-3-14</u>	Time: <u>1:43</u>
Vehicle Make: <u>Pontiac</u>		Model: <u>G6</u>	Year: <u>238884</u>
GVWR:	Fuel Type: <u>G</u>	Registration Number:	
Auditor: <u>Dosserr</u>		Covert/ <u>Overt</u> (Circle One)	
		YES	NO
1. Did technician check vehicle paper work and verify VIN number?		<input checked="" type="checkbox"/>	
2. Was Emissions testing required?		<input checked="" type="checkbox"/>	
a) Was Emissions testing performed using OBD?			<input checked="" type="checkbox"/>
b) Was Emissions testing performed using Analyzer Probe?		<input checked="" type="checkbox"/>	
c) Was Emissions testing performed using Paddle(s)?			<input checked="" type="checkbox"/>
d) Was Emissions testing performed using Clip?			<input checked="" type="checkbox"/>
3. Was Catalytic Converter inspection required?			<input checked="" type="checkbox"/>
a) Was Catalytic Converter inspection performed?			<input checked="" type="checkbox"/>
4. Was Fuel Tank pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Tank pressure testing performed?			<input checked="" type="checkbox"/>
5. Was Fuel Cap pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Cap pressure testing performed?			<input checked="" type="checkbox"/>
6. Is this test a Re-check from a prior failure?			<input checked="" type="checkbox"/>
a) Which re-check test is being performed? 1 2 3 (circle one)			<input checked="" type="checkbox"/>
b) If this is re-check #3, was repair paperwork verified for waiver?			<input checked="" type="checkbox"/>
Sussex County Only			
7. Was Curb Idle testing required?		<input checked="" type="checkbox"/>	
a) Was Curb Idle testing performed?		<input checked="" type="checkbox"/>	
Comment:			

Original 08/06/2009/TMP

DMV Lane Technician Observation Report

DMV Technician: <u>Jeff Hertzog</u>		Position: <u>1</u> or 2	
Station: <u>Georgetown</u>		Date: <u>12-3-14</u>	Time: <u>1:50</u>
Vehicle Make: <u>Chevy</u>		Model: <u>SIL</u>	Year: <u>2007</u>
GVWR:	Fuel Type: <u>G</u>	Registration Number: <u>VN 37611</u>	
Auditor: <u>Dossert</u>		Covert/ <u>Over</u> t (Circle One)	
		YES	NO
1. Did technician check vehicle paper work and verify VIN number?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Was Emissions testing required?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
a) Was Emissions testing performed using OBD?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) Was Emissions testing performed using Analyzer Probe?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
c) Was Emissions testing performed using Paddle(s)?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) Was Emissions testing performed using Clip?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Was Catalytic Converter inspection required?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Was Catalytic Converter inspection performed?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Was Fuel Tank pressure testing required?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Was Fuel Tank pressure testing performed?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Was Fuel Cap pressure testing required?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Was Fuel Cap pressure testing performed?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Is this test a Re-check from a prior failure?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Which re-check test is being performed? 1 2 3 (circle one)		<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) If this is re-check #3, was repair paperwork verified for waiver?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Sussex County Only		<input type="checkbox"/>	<input type="checkbox"/>
7. Was Curb Idle testing required?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
a) Was Curb Idle testing performed?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Comment:			

Original 08/06/2009/TMP